

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name

Uplift Family Services

Division, Department, or Region (if applicable)

Jennifer Boltinghouse ASW

Designated Agency Contact (Name, Title)

Foster Care & Adoption

Area Code/Phone Number

E-mail

408-540-9618

jboltinghouse@upliftfs.org

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California Form 802

For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

Date of Original Filing: _____
(month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☐ No ☒ Face Value of Each Ticket/Pass \$ 92

Event Description: Disney on Ice Date(s) 10/27/18
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐ If no: _____

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Boltinghouse, Jennifer
Name of Source
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
	<u>Uplift Family Services</u> <u>Foster Care & Adoption</u>	<u>24</u>	<u>Tickets distributed to foster youth families</u> ^{*adoption}

B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:

C.	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Jen Boltinghouse Jen Boltinghouse ASW Social Worker 10-27-18
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: Thank you our families loved it!

Pavilion Ticket Outreach Information

Event: Disney on Ice

Event Date: October 27, 2018 at 11am

Applicant Name: Jennifer Boltinghouse

Applicant Email: jboltinghouse@uplifts.org

Applicant Organization: Uplifts Family Services Foster and
Adoption Services

Number of tickets issued: 24

Ticket Price: \$ 92.00

Ticket location(s):

Concourse Suite C-11
Section 104, Row 15, Seats 9 and 10
Section 104, Row 16, Seats 5-10

Applicant Confirmation Date: 10/19/18

Pick-up Notification Sent: 10/23/18